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PTO/SB/05 (2/98)

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10/60/101
UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(h))

Attorney Docket No. 00801.0192.NPUS00

First Named Inventor or Application Identifier

Simon Santa

Title EXPRESSION OF FOREIGN GENES FROM PLANT VECTORS

Express Mail Label No. EL615207949US

A
11/09/01**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents

1. <input checked="" type="checkbox"/> Fee Transmittal Form (Form PTO-1082) (Submit an original and a duplicate for fee processing)	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification [Total Pages 35]	7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
- Descriptive title of the Invention	
- Cross References to Related Applications	
- Statement Regarding Fed sponsored R&D	
- Reference to Microfiche Appendix	
- Background of the Invention	
- Brief Summary of the Invention	
- Brief Description of the Drawings (if filed)	
- Detailed Description	
- Claims	
- Abstract of the Disclosure	
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 4]	8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
4. Oath or Declaration [Total Pages]	9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)
a. <input type="checkbox"/> Newly executed (original or copy)	10. <input type="checkbox"/> English Translation Document (if applicable)
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]	11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	12. <input type="checkbox"/> Preliminary Amendment
5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (should be specifically itemized)
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP)	14. <input type="checkbox"/> *Small Entity Statement(s) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired
Prior Application Information: Examiner: Group/Art Unit:	
18. CORRESPONDENCE ADDRESS	

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Signature	<i>Albert P. Halluin</i> (41,131)		Date	January 9, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

10/60/10
EXPRESS MAIL NO. EL615207949US
FORM PTO-1082

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Attorney Docket No. 00801.0192.NPUS00

Box Patent Application
COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Sir:

Transmitted herewith for filing is the patent application of **SIMON SANTA-CRUZ, GREGORY P. POGUE, RACHEL L. TOTH, SEAN CHAPMAN, and FIONA CARR**, for **EXPRESSION OF FOREIGN GENES FROM PLANT VIRUS VECTORS**.

Also, enclosed are:

1. Utility Application Transmittal;
2. Sequence Listing;
3. 4 Sheets of Formal Drawings; and
4. Return postcard.

The filing fee has been calculated as shown below:

	(Col. 1)	(Col. 2)
FOR	NO. FILED	NO. EXTRA
BASIC FEE		
TOTAL CLAIMS	-20 =	0
INDEP. CLAIMS	-3 =	0
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED		

*If the difference in Col. 1 is less than zero, enter "0" in Col. 2

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OR	RATE	OR	RATE
	\$ 345.00		\$ 690.00
OR	x 9 = 0.00		x 18 =
OR	x 39 = 0.00		x 78 =
OR	+ 130 = 0.00		+ 260 =
OR	TOTAL \$345.00	TOTAL	

Date January 9, 2001

Oral 2/1, 41,131, for
Albert P. Halluin (25,227)
Robin C. Chiang (46,619)